

BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2004

Application or Docket Number

09 1088464

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|--------------|--------------------------|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | minus 20 = | * |
| INDEPENDENT CLAIMS | minus 3 = | * |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

12-1-04 CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|--|---|------------|---|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | 25 | Minus | 25 |
| Independent | 4 | Minus | 4 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| SMALL ENTITY TYPE | OTHER THAN OR SMALL ENTITY |
|-------------------|----------------------------|
| RATE | FEE |
| BASIC FEE | 395.00 |
| OR | BASIC FEE 790.00 |
| x 25 | |
| OR | x 50 |
| x 100 | |
| OR | x 200 |
| + 180 | |
| TOTAL | |
| OR | TOTAL |

| SMALL ENTITY | OTHER THAN | SMALL ENTITY |
|------------------|----------------|------------------|
| RATE | ADDITIONAL FEE | RATE |
| x 25 | | x 50 |
| OR | x 100 | x 200 |
| + 180 | | + 360 |
| TOTAL ADDIT. FEE | | TOTAL ADDIT. FEE |

| | (Column 1) | (Column 2) | (Column 3) |
|--|---|------------|---|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | Minus | Minus | = |
| Independent | Minus | Minus | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE, ADDITIONAL FEE | RATE, ADDITIONAL FEE |
|----------------------|----------------------|
| x 25 | x 50 |
| OR | x 100 |
| + 180 | x 200 |
| TOTAL ADDIT. FEE | + 360 |
| OR | TOTAL ADDIT. FEE |

| | (Column 1) | (Column 2) | (Column 3) |
|--|---|------------|---|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | Minus | Minus | = |
| Independent | Minus | Minus | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE, ADDITIONAL FEE | RATE, ADDITIONAL FEE |
|----------------------|----------------------|
| x 25 | x 50 |
| OR | x 100 |
| + 180 | x 200 |
| TOTAL ADDIT. FEE | + 360 |
| OR | TOTAL ADDIT. FEE |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1..